(b) Government is actively contemplating expansion of a programme on care and support for people living with HIV/AIDS across the six high prevalence states, namely, Andhra Pradesh, Karnataka, Maharashtra, Manipur, Nagaland and Tamil Nadu, so as to include anti-retroviral drugs for specific target groups, through the pubic health care system.

Treatment for Osteoporosis

2084. SHRI B.J. PANDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the AIIMS, among others, has been asked by ICMR to gear up for better osteoporosis treatment; if so, the details of such other centres;

(b) whether it is a fact that the bones of Indian people have poorer mineral content than those of African and Asian descent and whether around 1.5 crores of our population suffers from bones diseases; and

(c) whether a meet on the subject was held in AIIMS premises last October to create awareness about this disease, if so, the details of the observations made at this meet?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to.(c) The information is being collected and will be laid on the Table of the House.

WHO's Report on TB Patients

2085. SHRI K. RAMA MOHANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a report issued recently by World Health organisation states that more than 4.5 million persons in India are suffering from Tuberculosis-the highest number of TB patients in the world; and

(b) if so, the steps taken by Government to launch on massive scale a renewed campaign to check the scourage of TB?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Yes, Sir.

(b) To control the disease, National TB Control Programme is in operation in the country since 1962. Revised National TB Control Programme based on DOTS, which is a WHO recommended strategy, is

being implemented in a phased manner, with the objective of achieving cure rate of 85% of new sputum positive cases and to detect at least 70% of such cases. Diagnosis by sputum microscopy instead of by X-ray helps in detecting and curing infectious cases on priority. Facilities for diagnosis by sputum microscopy have been decentralized and strengthened. Drugs are provided under observation and patients are monitored so that they complete their treatment. Drugs are provided free of-cost in patient-wise boxes.

DOTS coverage is being rapidly expanded in the country. From 20 million coverage in 1998, about 760 million population has been covered at present. It is envisaged to cover 850 million population by 2004 and the entire country by 205 under the revised strategy.

The project districts have reported a cure rate of more than 80% which means more than 8 out of every 10 patients diagnosed and put on treatment under revised strategy are successfully treated. This is double that of the earlier programme.

In order to check the scourge of the disease and to make the programme more accessible to lager segments of the population, and to supplement the Government efforts in this direction, emphasis is being given to also involve medical colleges, all general hospitals, private practitioners and NGOs in the programme.

Village Health Guide Scheme

2086. SHRI RAMACHANDRA KHUNTIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have stopped the Village Health Guide Scheme;

(b)whether it is a fact that in many States particularly in Orissa the village health guides have not received their Rs. 50/- salary continuously for five years; and

-(c) if so, whether Government in consultation with the State Government will take appropriate steps for clearing their wages arrear?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Yes, Sir. The Central Government's